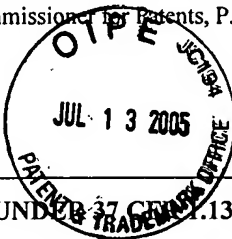


**CERTIFICATE OF TRANSMISSION/MAILING**

Ref. No.: 12439-00034

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at (703) 872-9306 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 11, 2005.

Erin Cowles



|  |  |                          |  |
|--|--|--------------------------|--|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)<br/>FY 2005</b>            |  | Docket Number (Optional) |  |
| Application Number 10/692,114  |  | Filed October 23, 2003   |  |
| For Contact Carriers (Tiles) For Populating Larger Substrates With Spring Contacts |  |                          |  |
| Art Unit 2839  |  | Examiner Neil Abrams     |  |

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate for below):

|   | <u>Fee</u> | <u>Small Entity Fee</u> |                  |
|---|------------|-------------------------|------------------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120      | \$60                    | \$ <u>120.00</u> |
| <input type="checkbox"/> Two month (37 CFR 1.17(a)(2))            | \$450      | \$225                   | \$               |
| <input type="checkbox"/> Three month (37 CFR 1.17(a)(3))          | \$1020     | \$510                   | \$               |
| <input type="checkbox"/> Four month (37 CFR 1.17(a)(4))           | \$1590     | \$795                   | \$               |
| <input type="checkbox"/> Five month (37 CFR 1.17(a)(5))           | \$2160     | \$1080                  | \$               |

☐ Applicant claims small entity status. See 37 CFR 1.27.

☒ A check that includes the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500843. I have enclosed a duplicate copy of this sheet.

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)

☒ attorney or agent of record. Registration Number 39,923

☒ attorney or agent under 37 CFR 1.34. Registration Number 39,923

N. Kenneth Burraston

July 11, 2005  
 Date  
  
(801) 323-5934  
 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.